ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70385	10
O.I.P.E. CLASSIFIER		59	7/8
FORMALITY REVIEW	M	SC 825	08/18/00
RESPONSE FORMALITY REVIEW	FH	JC 850	12-14-00

INDEX OF CLAIMS

,	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
		0	Objected

•	\1		
Claim	Date	Claim Date	Claim Date
iginal		Original	Final
		51	101
		52	102
		53	103
190		54	104
2507	<i>1</i> 7	55	105
		56	106
		57	107
18 1	8-8-1-1-1-1	58	109
9		60	110
		61	111
		62	112
		63	113
100		64	114
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19		69	120
		70	121
TO THE		71 72	122
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25	* * - 	75	125
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33	- - - - - - 	84	134
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37		87	137
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40		90	140
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42		92	142
43		93	1144
44		94	145
45	- - - - - - - - - - - - - - - - - - - 	96	146
. 46	- - - - - - - - - - - - - - - - - - - 	97	1147
48		98	148
149		99	149 :
50		100	150

If more than 150 claims or 10 actions staple additional sheet here